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APPLICATION NO.	FILING DATE FIRST NA			MED INVENTOR			RNEY DOCKET NO.	CONFIRMATION NO.	
09/966,761	09/966,761 10/01/2001 Robert Cregg				rnes P07353US00/MP			6832	
TITLE OF INVENTION: C	IRCULAR DISPENSING C	ONTAINER WITI	H A HINGED	LID					
APPLN. TYPE	SMALL ENTITY	ISSUE F	EE	E PUBLICATION FEE		то	TAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400	)		\$300		\$1700	05/02/2006	
EXAMINER		ART UNIT		CL	CLASS-SUBCLASS				
HYLTON, RO	3727	727 220-254500							
1. Change of correspondenc CFR 1.363).  Change of correspon Address form PTO/SB/1  "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required.  3. ASSIGNEE NAME AND	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  THE PATENT (print or type)								
						ignee is id	entified below, the	document has been filed for	
recordation as set forth in (A) NAME OF ASSIGN	data will appear on the patent. If an assignee is identified below, the document has been filed for DT a substitute for filing an assignment.  (B) RESIDENCE: (CITY and STATE OF THE PENEL 00000208 09966761								
WM. WRIGLEY	Chicago, Illimoriason 1400.00 OP					1400.09 OP			
Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government									
4a. The following fee(s) are enclosed:  ♣ Issue Fee  ♣ Publication Fee (No small entity discount permitted)  ☐ Advance Order - # of Copies				Ab. Payment of Fee(s):  A check in the amount of the fee(s) is enclosed.  Payment by credit card. Form PTO-2038 is a rached ge any deficiencies.  The Director is hereby authorized with results to Deposit Account Number 12-0555 (enclose an extra copy of this form).					
	(from status indicated above MALL ENTITY status. See	•	☐ b. Applic	ant is no	longer claiming SN	ALL ENT	TITY status. See 37 C	CFR 1.27(g)(2).	
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Authorized Signature	Marin ?	telly			Date A	pril	5, 2006		
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This collection of informatian application. Confidential submitting the completed at this form and/or suggestion. Box 1450, Alexandria, Virginia 22313-	on is required by 37 CFR 1.3 ity is governed by 35 U.S.C. pplication form to the USPT's for reducing this burden, shinia 22313-1450. DO NOT 1.1450.	11. The information 122 and 37 CFR O. Time will vary tould be sent to the SEND FEES OR C	n is required 1.14. This col depending u chief Infort COMPLETEL	to obtain llection is pon the in nation O FORM:	or retain a benefit to sestimated to take additional case. Any fficer, U.S. Patent a STO THIS ADDRI	by the publes of the puble of the public of	ic which is to file (an to complete, including s on the amount of the lark Office, U.S. Dep O TO: Commissioner	d by the USPTO to process) ng gathering, preparing, and me you require to complete partment of Commerce, P.O. for Patents, P.O. Box 1450,	

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